117000033087

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(0.1)
(Document Number)
ertified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



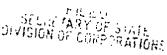
200301494522

07/20/17--01010--023 **35.00

DIVISION OF CHAINS

M. MILLIGAN
'JUL 27 2017

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



17 JUL 20 PH 4: 08 ability Company as it now appears on our records.) lorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 02/10/2017 and assigned Florida document number <u>L 17000033087</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." INNOVATTIO, LLC Enter new principal offices address, if applicable: 2470 NW 49TH TERRACE (Principal office address MUST BE A STREET ADDRESS) COCONUT CREEK Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: DIESO

New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or If this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

or removed f	rom our records:			
MGR = Ma $AMBR = Au$	nnager, ithorized Member			
<u>Title</u>	<u>Name</u>	Address		Type of Action
<u>AMBR</u>	DIEGO OROZCO	2470 N	IW 49TH TERRACE	□ Add
		COCON	UT CREEK	□ Remove
		FLOR	IDA, 33063	■ Change
AMBR	R. SEBASTIAN SCHRAI	DER		□ Add
		2470 N	W 49Th TERRACE	D Remove
		COCONU	CREEK, FL 3306	3_
<u>AMBR</u>	ZACITZAS 320E	1937 N	W 130TH AVENUE	□ Add
		PEMBR	POKE PINES	Remove
		FLOR	IDA, 33028	Change
- 				Add
				Remove
				Change
				Add
				_□ Remove
		·		Change
				\ Add
				_□ Remove
				_□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

	eise.—		
• •			
			<u>/</u> .
		 	
		/	
		-	
			-
		<u> </u>	
		<u> </u>	
	0-1.		
ctive date, if other than the date of i			ptional)
effective date is listed, the date must be specif :: If the date inserted in this block does			
ement's effective date on the Department ecord specifies a delayed effecti		fective time, at 12:0	1 a.m. on the earlier
ment's effective date on the Departmen ecord specifies a delayed effecti		fective time, at 12:0	7 20.
ecord specifies a delayed effectine 90th day after the record is fi		fective time, at 12:0	7 20.
ecord specifies a delayed effectine 90th day after the record is fi		fective time, at 12:0	~ =
ecord specifies a delayed effectine 90th day after the record is fi		fective time, at 12:0	7 20.
ment's effective date on the Department ecord specifies a delayed effectione 90th day after the record is fixed			ASIGN OF SO
ecord specifies a delayed effectine 90th day after the record is find			ASIGN OF CO
ecord specifies a delayed effectine 90th day after the record is find	or a member of authorized re	necentative of a member	ASIGN OF COMPORAT
ment's effective date on the Department ecord specifies a delayed effectione 90th day after the record is fixed	or a member of authorized re	ore entative of a member	ASTON OF COMPORAT

Filing Fee: \$25.00